IAP15 Rec'd PCT/PTO 07 AUG

PTO/SB/21 (09-04) Approved for use through 07/31/2006. OMB 0651-0031

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	Application Number	10/530,598					
TRANSMITTAL	Filing Date	7 April 2005					
FORM	First Named Inventor	Moti HAREL					
	Art Unit	1618					
(to be used for all correspondence after initial filing)	Examiner Name	NOT YET ASSIGNED					
Total Number of Pages in This Submission	Attorney Docket Number	E1975-00020 [PA35]					
ENCLOSURES (Check all that apply)							
Fee Transmittal Form Fee Attached	Drawing(s) Licensing-related Papers	After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences					
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Group Art

Unit:

1618

Serial No.:

MOTI HAREL, et al.

Conf. No.:

6923

Filed:

7 April 2005

10/530,598

Examiner:

Unknown

For:

Improved Absorption of Fat-Soluble

Atty Docket

E1975-00020

Nutrients

No.:

(PA35)

INFORMATION DISCLOSURE STATEMENT

This Supplemental Information Disclosure Statement is being filed in connection with the patent application referenced above. The Examiner is requested to consider each of the references cited herein and forward an initialed copy of the enclosed SB/08 form to the undersigned representative. This Statement is being filed before the mailing date of a first Office action on the merits for this application.

A copy of each of the references listed on the attached Form SB/08 which are not U.S. Patents or U.S. Patent Application Publications are enclosed herewith and forms a part hereof.

No fee is believed due in connection with filing of this Statement. However, in the event a fee or refund is due, the Commissioner is authorized to charge any fee associated with this communication or credit any overpayment to Deposit Account No. 04-1679 (billing reference **E1975-00020**).

Respectfully submitted,

Moti HAREL, et al.

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AUG. 0 7, 2006

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Under the Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. Complete if Known Substitute for form 1449/PTO **Application Number** 10/530,598 INFORMATION DISCLOSURE **Filing Date** 7 April 2005 STATEMENT BY APPLICANT **First Named Inventor** Moti HAREL Art Unit 1618 (Use as many sheets as necessary) **Examiner Name** NOT YET ASSIGNED Attorney Docket Number Sheet E1975-00020 [PA35] 1 of

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Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
	1	CAÑIZARES-VILLANUEVA et al., 1998, Rev Lat-Amer. Microbiol. 40(102):87-107	
	2	CLARK et al., 2000, Lipids 35(7):803-6	
	3	HINOSTROZA et al., 1997, Arch Lat-Amer. Nutr. 47(3):237-241	
	4	LOCKWOOD et al., 2003, J. Pharm. Sci. 92(4):922-926	
	5	PANE et al., 1996, J. Biol. Res Boll Soc. It. Biol. Sper. 72(11-12):303-308	
	6	PARAJO et al., 1998, Biotechnol Bioeng. 59(4):501-506	
	7	SHAHIDI et al., 1998, Crit. Rev. Food Sci. Nutri. 38(1):1-67	

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